

**VISALIA UNIFIED SCHOOL DISTRICT
HUMAN RESOURCES DEVELOPMENT**

PERSONNEL ACTION REQUEST

RESIGNATION/RETIREMENT

☐ **Certificated**
☐ **Classified**

Name: _____ Date: _____

Employee Number: _____

Present School/Location: _____ Present Assignment: _____

Please initiate the following personnel action request: ☐ RESIGNATION* ☐ RETIREMENT**

I hereby voluntarily tender my resignation as an employee of Visalia Unified School District.

My last workday will be _____, 20____. My retirement date will be

_____, 20____. **I understand my resignation/retirement may not be
revoked once accepted by the Superintendent/Designee.**

REASON (optional) _____

BENEFIT INFORMATION

To best determine your core benefit options after resignation/retirement please indicate if your spouse/domestic partner is a current VUSD employee. ☐ **YES** ☐ **NO**

- * After termination of any health benefits, you will be notified by mail of COBRA rights to continue insurance.
- * VUSD group life insurance may be converted to a personal life insurance policy within 31 days from the last date of employment. Contact Risk Management if you want to consider converting your group life.
- ** Retiring employees must wait 180 days from retirement (effective retirement date from STRS/PERS) prior to being able to return to any type of employment or a consultant as a retiree at a STRS/ PERS agency.
- ** Retiring employees will be notified by mail regarding continuation of health benefits as a retiree.

Employee Signature

Telephone Number

Permanent Address **Check ☐ if new address**

City, State, Zip

Received by: Principal/Supervisor Signature
(Does not indicate acceptance)

Date

Human Resources Development Use Only

Date Accepted: _____

Days of Unused Sick Leave at Retirement
_____ days

By: _____
Superintendent/Designee

Signature